



## \*BIBDATASHEET\*

CONFIRMATION NO. 8085

Bib Data Sheet

SERIAL NUMBER 09/030,989	FILING DATE 02/26/1998  RULE	CLASS 340	GROUP ART UNIT 2635	ATTORNEY DOCKET NO. 28724/34520
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## APPLICANTS

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DIRK R. SMITH, ST. PAUL, MN;

JAMES R. WATTS, WOODBURY, MN;TIMOTHY J. KRIEWALL, CASTLE ROCK, CO;

RICHARD A. GRIEWSKI, CANTON TOWNSHIP, MI;

## \*\*CONTINUING DATA\*\*\*\*\*

This application is a CON of 08/723,504 09/30/1996 PAT 5,813,972

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/13/1998

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 15 0	TOTAL CLAIMS 7 17	INDEPENDENT CLAIMS 3 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature Initials			

## ADDRESS

21839

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## TITLE

MEDICAL PERFUSION SYSTEM

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
RECEIVED	No. _____ for following:	<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )



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Verified and Acknowledged	Examiner's Signature	Initials		

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ANN ARBOR , MI

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## TITLE

Adapter pod for use in medical perfusion system

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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ADDRESS 21839 BURNS DOANE SWECKER & MATHIS L L P POST OFFICE BOX 1404 ALEXANDRIA , VA 22313-1404				
TITLE Adapter pod for use in medical perfusion system				
FILING FEE  RECEIVED 1094	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	